

OFFICE USE ONLY
PERMIT #:
CLERK:
DATE ISSUED:

SECURITY ALARM REGISTRATION APPLICATION

Date	☐ New	☐ REPLACE DECAL #		☐ UPDATE	
I. SUBSCRIBER INFORMATION					
	(PLEASE TYPE OR PRINT LE	GIBLY WITH BALL	POINT PEN)		
☐ COMMERCIAL ☐ F	ESIDENTIAL				
BUSINESS/RESIDENT'S NAME			BUSINESS PHONE		
STREET ADDRESS			I	ZIP CODE	
BUSINESS OWNER'S NAME			RESIDENCE	PHONE	
Mailing Address					
	II. ALARM COMF	ANY INFORMAT	ION		
Monitoring Company			PHONE		
TYPE OF ALARM:	AUDIBLE S	ILENT	☐ Non-mon	ITORED	
	III. EMERGENO	Y N OTIFICATIO	N		
LIST THREE RESPONSIBLE REPRESENT ACTIVATION TO ASSIST THE POLICE IN					
Name					
DAY TELEPHONE ()		NIGHT TELEPHO	ONE ()		
NAME		THOM TELEFTIN	SIVE ()		
Day Telephone ()		NIGHT TELEPHO	ONE ()		
Name					
Day Telephone ()		NIGHT TELEPHO	ONE ()		
CITY OF RENTON CODE, CHAPTER 3, TITLE SYSTEMS TO HAVE VALID ALARM REGISTR. ALARM SYSTEM, AND/OR A PENALTY OF \$5	ATIONS. FAILURE TO COMPLETE				
REGISTRATION OF AN ALARM SYSTEM DOES NOT LIABILITY AND CONSEQUENTIAL DAMAGE RESULT BY LAW IS RETAINED. BY REGISTERING AN ALARM UNITS, PRIORITY OF CALLS, WEATHER CONDITION	NG FROM THE FAILURE TO RESPOND I SYSTEM, THE USER ACKNOWLEDGE	TO A NOTIFICATION IS I	HEREBY DISCLAIMED, AN NSE MAY BE BASED ON F	ID GOVERNMENTAL IMMUNITY AS PROVIDE	
SIGNATURE_			Return Complete Renton Police De	partment	
HELP PREVENT FALSE A	_ARMS		Attention: Patrol 1055 South Grad Renton, WA 9805	y Way	